PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450

Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for	any change of address)	0.5	Note: A certificate of	of mailing can only be used f	or domestic mailings of th							
7590 10/13/2005		OLPE		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.									
Paul A. Leipold	10,15,2005	/	\$6 \		autificate of Mailing or Tran	emission							
Patent Legal Staff Eastman Kodak Company 343 State Street Rochester, NY 14650-2201		JAN 0 9 2006		I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name									
							10/2006 EHAILE2 0000	0049 10700916			Sile	- arfae	(Signature
							FC:1501 FC:1504	1400.00 OP 300.00 OP			L Ogas	mary 4, 200	Oh (Date
							APPLICATION NO.	FILING DATE	FI	IRST NAMED INVEN	TOR U	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/700,916	10/700,916 11/04/2003		William J. Begley		86722AEK	8889							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	E PU	JBLICATION FEE	TOTAL FEE(S) DUE \$1700	DATE DUE 01/13/2006							
nonprovisional	NO	\$1400		\$300	\$300								
EXAMINER		ART UNIT	r CI	ASS-SUBCL ASS									
GARRETT, DAWN L		1774		428-690000									
1. Change of correspondence address or indication of "Fee Address" (3' CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a										
	RESIDENCE DATA TO E	E PRINTED ON TH	HE PATENT (print	or type)									
3. ASSIGNEE NAME AND			ata will appear on t	he patent. If an assi	gnee is identified below, the	document has been filed t							
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified by a 37 CFR 3.11. Completion	elow, no assignee do of this form is NOT	a substitute for filin	g an assignment.	-								
DI FASE NOTE: Unless	an assignee is identified by 37 CFR 3.11. Completion	of this form is NOT	a substitute for fifth	g an assignment. 'Y and STATE OR C	4								
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified by 37 CFR 3.11. Completion	of this form is NOT	a substitute for fifth	g an assignment.	4								
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO	s an assignee is identified ben 37 CFR 3.11. Completion EE DAK COMPANY	of this form is NOT	RESIDENCE: (CIT	g an assignment.	4								
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST	s an assignee is identified ben 37 CFR 3.11. Completion EE. DAK COMPANY REET, ROCHEST	(B)	RESIDENCE: (CIT	y and STATE OR C	4								
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST	s an assignee is identified ben 37 CFR 3.11. Completion EE DAK COMPANY REET, ROCHEST e assignee category or category	(B) ER, XY 146 ries (will not be prin	RESIDENCE: (CIT	y and STATE OR C	OUNTRY)								
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST Please check the appropriate 4a. The following fee(s) are	s an assignee is identified ben 37 CFR 3.11. Completion EE DAK COMPANY REET, ROCHEST e assignee category or category	(B) ER, XY 146 ries (will not be prin 4b.	RESIDENCE: (CIT	y and STATE OR C	OUNTRY) Corporation or other private g								
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST Please check the appropriate 4a. The following fee(s) are 1 ssue Fee	s an assignee is identified ben 37 CFR 3.11. Completion EE DAK COMPANY REET, ROCHEST e assignee category or category	(B) ER, XY 146 ries (will not be prin 4b.	RESIDENCE: (CIT	Individual Industrial Individual Industrial Individual Industrial	OUNTRY) Corporation or other private g enclosed. 38 is attached.	roup entity 🗖 Governme							
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No. 8)	an assignee is identified by 37 CFR 3.11. Completion EE DAK COMPANY REET, ROCHEST e assignee category or category enclosed:	(B) ER, XY 146 ries (will not be prin 4b.	RESIDENCE: (CIT	Individual	OUNTRY) Corporation or other private g enclosed. 138 is attached. charge the required fee(s), or	roup entity 🗖 Governme							
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST Please check the appropriate 4a. The following fee(s) are 1 ssue Fee 1 Advance Order - # o 5. Change in Entity Status	an assignee is identified by a 37 CFR 3.11. Completion EE DAK COMPANY REET, ROCHEST e assignee category or category enclosed: small entity discount permitt f Copies (from status indicated above	(B) ER, XY 146 ries (will not be prin 4b.	RESIDENCE: (CIT	Individual Individual Inount of the fee(s) is it card. Form PTO-20 thereby authorized by	Corporation or other private g enclosed. 38 is attached. charge the required fee(s), or (enclose an extra	roup entity Government, overpayment, copy of this form).							
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN EASTMAN XO 343 STATE ST Please check the appropriate 4a. The following fee(s) are 1ssue Fee Publication Fee (No s Advance Order - # o 5. Change in Entity Status a. Applicant claims S	an assignee is identified by a 37 CFR 3.11. Completion EE DAK COMPANY REET, ROCHEST e assignee category or categorenclosed: small entity discount permitt f Copies (from status indicated above MALL ENTITY status. See	(B) ER, N 146 ries (will not be prin 4b. ed) 2) 37 CFR 1.27.	RESIDENCE: (CIT The Description of Fee(s): A check in the are Payment by cred The Director is Deposit Account Number 1: 10 of the page 1: 10 of the page 2: 10 of the page 3: 10 of the page	Individual	OUNTRY) Corporation or other private g enclosed. 138 is attached. charge the required fee(s), or	roup entity Government, or credit any overpayment, copy of this form).							

Registration No. Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.